

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS | ID NO. | DATE     |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION         | E.H.     |        | 07-31-01 |
| O.I.P.E. CLASSIFIER       |          | 43     | 8/13/01  |
| FORMALITY REVIEW          | TL       | 92     | 09/10/01 |
| RESPONSE FORMALITY REVIEW | TA       | 113    | 02-23-02 |

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim    | Date |
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If more than 150 claims or 10 actions  
staple additional sheet here

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**BEST AVAILABLE COPY**

830  
9/10/01

617-25-02